Person Filing:		
Person Filing: Address (if not protected):		
City, State, Zip Code:	_	
Telephone:		
Email Address:		
Lawyer's Bar Number:		FOR CLERK'S USE ONLY
Representing:   Self without a lawyer O	R 🗖 Attorney for:	
	OR COURT OF ARIZONA IN PIMA COUNTY	
IN THE MATTER OF:	Case Number:  DECLARATION OF SI	
(Name(s) of Child(ren))	BY CERTIFIED MAIL	
stated herein are true and correct. on the other party by certified ma	I in this Declaration and know of my over I make this Declaration to show that I have il, postage prepaid, return receipt requestion to the Court and A.R.S. §8-841(E). A coto:	nave served the court papers sted, pursuant to Rule 48 of
Person served (Name of Other	Party):	
Relationship of Other Party to Address where Other Party wa served:	Me:	
Date of receipt by the Other Pa		
Date of return of green receipt	to me:	
2. These court papers were received which is attached to this Declarati	I by the other party as shown by the gron.	reen receipt, the original of

Decia	aration of Service by Certified Mail	Date:	Case Number:
3.	Service by certified mail instea	d of personal service w	vas used because: (Be specific)
DEC	CLARATION		
I d an	leclare under penalty of perjury thad belief.	at the foregoing is true	and correct to the best of my knowledge
S	Signature		Date